



2017 ANNUAL RENT REGISTRY FORM
RENTAL UNITS SUBJECT TO THE RENT STABILIZATION ORDINANCE

BILLING CONTACT INFORMATION (ON FILE)		PROPERTY INFORMATION	
LOYOLA HIGH SCHOOL OF LOS ANGELES 1901 VENICE BLVD LOS ANGELES CA 90006-4401		APN:	5075008019
		ADDRESS:	1415 FEDORA ST LOS ANGELES, CA 90006
		STATEMENT NUMBER:	7360658
		PIN:	4738728

YOUR INFORMATION (NAME OF PERSON FILLING OUT FORM)	
FIRST NAME <u>DONALD</u>	LAST NAME <u>SWARTZ</u>
AREA CODE & PHONE NUMBER <u>(310) 831-1297</u>	
EMAIL ADDRESS <u>DONSWARTZ@COX.NET</u>	

The Los Angeles City Council enacted the Rent Registry Ordinance (#184529) effective October 4, 2016. This Ordinance provides that landlords must provide rent amount and tenancy information for every rental unit subject to the Rent Stabilization Ordinance (RSO) on a form prescribed by HCIDLA. This information shall be submitted annually by the last day of February of each year. Registration is complete only when all outstanding registration fees have been paid and all required rental amount and tenancy information including emergency contact information is provided. For questions regarding this form, please call (866) 557-RENT (7368) or visit registerLarent.org.

PART 1

EMERGENCY CONTACT INFORMATION (Current contact information required per LAMC 151.05 B.)			
FIRST NAME <u>DONALD</u>		LAST NAME <u>SWARTZ</u>	
HOUSE NUMBER <u>2038</u>	STREET NAME <u>DALADIER DR</u>		
CITY <u>RANCHO PALOS VERDES</u>	STATE <u>CA</u>	ZIP CODE <u>90275</u>	
AREA CODE & PHONE NUMBER <u>(310) 831-1297</u>			
E-MAIL ADDRESS (Optional) <u>DONSWARTZ@COX.NET</u>			

Total Number of Units on Property*:

<u>3</u>
<u>-0-</u>

*If Incorrect, Indicate the Total Number of Units on Property:

ALL TOTALLY DEMOLISHED
IN 2015 WITH PERMITS.
LOOK ON GOOGLE EARTH

HCIDLA
RECEIVED
FEB 28 2017
Rent Stabilization Division
GARLAND COUNTER

FORM CONTINUED ON BACK SIDE

Complete This Form Online at registerLarent.org or Mail to: P.O. BOX 30970 Los Angeles, CA 90030-0970.

Assessor Parcel Number (APN): 5075008019

Service Year 2017

Rental Unit Address #1						
House Number	Street Name	Unit Number	# of Bed-rooms	Move-In Date MM/YYYY	Current Monthly Rent	Effective Date of Last Rent Increase MM/YYYY
1415 1/2	S FEDORA ST	-0-	-0-	1	\$ -0-	1
Utility Paid by Landlord		Parking Included in Monthly Rent		RSO Exemption Application Submitted to HCIDLA (if applicable, only check one)		
<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> T1 Owner Occupied <input checked="" type="checkbox"/> T3 No Rent Collected		<input type="checkbox"/> S5 Vacant <input checked="" type="checkbox"/> Other RSO Exemption DEMO'D		
Rental Unit Address #2						
House Number	Street Name	Unit Number	# of Bed-rooms	Move-In Date MM/YYYY	Current Monthly Rent	Effective Date of Last Rent Increase MM/YYYY
1417 1/2	S FEDORA ST	-0-	-0-	1	\$ -0-	1
Utility Paid by Landlord		Parking Included in Monthly Rent		RSO Exemption Application Submitted to HCIDLA (if applicable, only check one)		
<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> T1 Owner Occupied <input checked="" type="checkbox"/> T3 No Rent Collected		<input type="checkbox"/> S5 Vacant <input checked="" type="checkbox"/> Other RSO Exemption DEMO'D		
Rental Unit Address #3						
House Number	Street Name	Unit Number	# of Bed-rooms	Move-In Date MM/YYYY	Current Monthly Rent	Effective Date of Last Rent Increase MM/YYYY
1417	S FEDORA ST	-0-	-0-	1	\$ -0-	1
Utility Paid by Landlord		Parking Included in Monthly Rent		RSO Exemption Application Submitted to HCIDLA (if applicable, only check one)		
<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> T1 Owner Occupied <input checked="" type="checkbox"/> T3 No Rent Collected		<input type="checkbox"/> S5 Vacant <input checked="" type="checkbox"/> Other RSO Exemption DEMO'D		
Rental Unit Address #4						
House Number	Street Name	Unit Number	# of Bed-rooms	Move-In Date MM/YYYY	Current Monthly Rent	Effective Date of Last Rent Increase MM/YYYY
				1	\$	1
Utility Paid by Landlord		Parking Included in Monthly Rent		RSO Exemption Application Submitted to HCIDLA (if applicable, only check one)		
<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> T1 Owner Occupied <input type="checkbox"/> T3 No Rent Collected		<input type="checkbox"/> S5 Vacant <input type="checkbox"/> Other RSO Exemption		
Rental Unit Address #5						
House Number	Street Name	Unit Number	# of Bed-rooms	Move-In Date MM/YYYY	Current Monthly Rent	Effective Date of Last Rent Increase MM/YYYY
				1	\$	1
Utility Paid by Landlord		Parking Included in Monthly Rent		RSO Exemption Application Submitted to HCIDLA (if applicable, only check one)		
<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> T1 Owner Occupied <input type="checkbox"/> T3 No Rent Collected		<input type="checkbox"/> S5 Vacant <input type="checkbox"/> Other RSO Exemption		

PART 3

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE

DONALD E. SWARTZ DATE 2/27/2017

PAGE 1 of 1

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